## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000030310

Entity Name: ABODE WORKS INC

FILED Sep 30, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

3644 POND VIEW LN 2390 PINE TERRACE SARASOTA, FL 34235 SARASOTA, FL 34231

**Current Mailing Address: New Mailing Address:** 

2390 PINE TERRACE 3644 POND VIEW LN SARASOTA, FL 34235 SARASOTA, FL 34231

FEI Number: 20-1330671 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEPHEN, THOMPSON STEPHEN, THOMPSON 2390 PINE TERRACE 3644 POND VIEW LANE SARASOTA SARASOTA, FL FL34235 US FL, FL 34231 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEPHEN THOMPSON 09/30/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition THOMPSON, STEPHEN THOMPSON, STEPHEN Name: Name: 3644 POND VIEW LANE 2390 PINE TERRACE Address: Address: City-St-Zip:

SARASOTA, FL 34231 SARASOTA, FL 34235 City-St-Zip:

Title: Title: (X) Change ( ) Addition () Delete Name: THOMPSON, STEPHEN Name: THOMPSON, STEPHEN 3644 POND VIEW LN Address: 2390 PINE TERRACE Address: SARASOTA, FL 34231 SARASOTA, FL 34235 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: STEPHEN THOMPSON 09/30/2009